

# **2013 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N02000004576

**FILED**  
**May 23, 2013**  
**Secretary of State**

**Entity Name:** THE HOLY PLACE, INC.

**Current Principal Place of Business:**

1481 S.W. BOUGAINVILLEA AVENUE  
PORT ST LUCIE, FL 34953

**New Principal Place of Business:**

**Current Mailing Address:**

2334 S.W. FERN CIRCLE  
PORT ST LUCIE, FL 34953 US

**New Mailing Address:**

**FEI Number:** 04-3689481

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DUFFIELD, RICHARD P  
2334 SW FERN CIR  
PORT ST LUCIE, FL 34953 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:** RICHARD DUFFIELD

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** DUFFIELD, RICHARD P PASTOR  
**Address:** 2334 SW FERN CIRCLE  
**City-St-Zip:** PORT ST LUCIE, FL 34953

**Title:** VP  
**Name:** EALY, SAM  
**Address:** 2647 SE TROPICAL EAST CIR  
**City-St-Zip:** PORT SAINT LUCIE, FL 34952

**Title:** ST  
**Name:** MCALLISTER, PAMELA L  
**Address:** 2469 S.W. ABERDEEN ST.  
**City-St-Zip:** PORT ST. LUCIE, FL 34953

**Title:** E  
**Name:** WAY, JIM ELDER  
**Address:** P.O. BOX 7275  
**City-St-Zip:** INDIAN LAKE ESTATES, FL 33855

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** RICHARD P DUFFIELD

P

05/23/2013

Electronic Signature of Signing Officer or Director

Date